

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>6139</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Douglas</u> <u>H</u> <u>Dority</u> P.O. Box, Bldg., Room No., if any Street <u>191 Kimmes Lane</u> City <u>Breckenridge</u> State <u>Colorado</u> ZIP Code + 4 <u>80424</u>	4. Name, file number, and address of labor organization. Name <u>UFCW International Union</u> Labor Organization File Number <u>000-056</u> P.O. Box, Building and Room Number, if any Street <u>1775 K Street, NW</u> City <u>Washington</u> State <u>District of Columbia</u> ZIP Code + 4 <u>20006</u>
5. Position in labor organization. <u>President (Retired 2-29-04)</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>Ahold USA, Inc.</u> Trade Name, if any: P.O. Box, Bldg., Room No., if any Street <u>1385 Hancock St.</u> City <u>Quincy</u> State <u>Massachusetts</u> ZIP Code + 4 <u>02169</u>	7.a. Nature of Interest, Transaction, or Income. <u>Business dinner; amount is based upon a per person charge, which overstates the amount attributable to respondent.</u> 7.b. Amount. <u>\$230</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed *Douglas H Dority* On 8-10-05 (941) 223-3195
Date Telephone Number

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <input type="text" value="UFCW Int'l Union - Industry Pension Fund"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text" value="301 East Ohio Street"/></p> <p>City <input type="text" value="Chicago"/></p> <p>State <input type="text" value="Illinois"/> ZIP Code + 4 <input type="text" value="60611"/></p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
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<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <input type="text"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>	<p>11.a. Nature of such dealing.</p> <div style="border: 1px solid black; padding: 5px; min-height: 60px;"> <p>The Fund receives contributions from employers according to local union collective bargaining agreements and pays benefits to UFCW members as required by those agreements. The amount in 11.b. reflects approximate 2004 contributions to the plan.</p> </div> <p>11.b. Approximate dollar value of such dealing. <input style="width: 100px;" type="text" value="\$8,200,000"/></p> <p>12.a. Nature of interest held or income received.</p> <div style="border: 1px solid black; padding: 5px; min-height: 60px;"> <p>Meals or receptions while attending trustee meetings; amounts are based on per person charges.</p> </div> <p>12.b. Amount. <input style="width: 100px;" type="text" value="\$171"/></p>
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C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <input type="text"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>	<p>14.a. Nature of payment.</p> <div style="border: 1px solid black; height: 150px; width: 100%;"></div>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment. <input style="width: 100px;" type="text"/></p>

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <input type="text" value="Zenith Administrators"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text" value="301 East Ohio St."/></p> <p>City <input type="text" value="Chicago"/></p> <p>State <input type="text" value="Illinois"/> ZIP Code + 4 <input type="text" value="60611"/></p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <input type="text" value="UFCW Int'l Union - Industry Pension Plan"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text" value="301 East Ohio Street"/></p> <p>City <input type="text" value="Chicago"/></p> <p>State <input type="text" value="Illinois"/> ZIP Code + 4 <input type="text" value="60611"/></p>	<p>11.a. Nature of such dealing.</p> <div style="border: 1px solid black; padding: 5px; min-height: 100px;"> <p>Zenith is the plan administrator.</p> </div> <p>11.b. Approximate dollar value of such dealing. <input style="width: 100px;" type="text" value="\$5,800,000"/></p> <p>12.a. Nature of interest held or income received.</p> <div style="border: 1px solid black; padding: 5px; min-height: 100px;"> <p>Meal at trustee meeting.</p> </div> <p>12.b. Amount. <input style="width: 100px;" type="text" value="\$84"/></p>

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <input type="text" value="GESD Capital Partners"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text" value="Suite 1450"/></p> <p>Street <input type="text" value="221 Main Street"/></p> <p>City <input type="text" value="San Francisco"/></p> <p>State <input type="text" value="California"/> ZIP Code + 4 <input type="text" value="94105"/></p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <input type="text" value="UFCW Industry Pension Fund"/></p> <p>Trade Name, if any: <input type="text" value="P.O. Box 11102"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text" value="301 East Ohio Street"/></p> <p>City <input type="text" value="Chicago"/></p> <p>State <input type="text" value="Illinois"/> ZIP Code + 4 <input type="text" value="60611-0102"/></p>	<p>11.a. Nature of such dealing.</p> <div style="border: 1px solid black; padding: 5px; min-height: 100px;"> <p>The trust invests in GESD pursuant to the decision of a professional investment manager.</p> </div> <p>11.b. Approximate dollar value of such dealing. <input type="text" value="\$87,500"/></p> <p>12.a. Nature of interest held or income received.</p> <div style="border: 1px solid black; padding: 5px; min-height: 100px;"> <p>Meal.</p> </div> <p>12.b. Amount. <input type="text" value="\$72"/></p>